

Pay Action 6/5/17

VANCE COUNTY
PERSONNEL / PAYROLL ACTION FORM

New Hire / Rehire Change Leave of Absence Termination

Effective Date: 06/05/2017

Employee # _____

Name: JUSTIN JAMEL WHITE

Deductions Number	From	Amount	Maximum
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____
7.	_____	_____	_____
8.	_____	_____	_____
9.	_____	_____	_____
10.	_____	_____	_____

Address: 6606 CLARKSBURG PLACE, MAILBOX 12

City/State: RALEIGH NC

Zip/County: 27616 WAKE

SS#: 244-63-6961

Marital Status: SINGLE

Date Hired: 06 / 05 / 2017

Department: SHERIFF'S OFFICE

Monthly or Hourly Salary: \$ _____ Federal Withholding: _____

State Withholding: _____

Time Earned Each Pay Period: _____ Time Earned Each Pay Period: _____

Sex: M Race: B Date of Birth: 08 / 15 / 1989

Annual Salary: \$ 30,012 Job Title: DEPUTY SHERIFF

Grade: _____ Job Code: _____

Explanation: DEPUTY SHERIFF-12 HOUR - EFFECTIVE JUNE 05, 2017 (CERTIFIED)

Employee Signature: [Signature] Date: 6-5-2017

Department Head Approval: [Signature] Date: 5-81-17

Human Resources Signature: _____ Date: _____

Payroll Signature: _____ Date: _____

Revised 9/2014

This instrument has been pre-audited in the manner required by the Local Government Budget & Fiscal Control Act.

Approved Finance Director _____